

STATE OF ARIZONA **COCONINO COUNTY** POLITICAL COMMITTEE CAMPAIGN FINANCE REPORT

FOR OFFICE USE ONLY RECEIVED

SEP 28 2016

1.	Christine Gannon for County Supervisor Full Name of Committee			Coconino County Elections		
2.		853-4626 ittee Phone #	3. ID#	16-013		
d	Sponsoring Organization (if applicable) Name of Candidate and Office Sought (if applicable)			ection: August 30, 2016 ction: November 8, 2016		
	Committee E-mail Address Com	mittee Fax #		Amended Report		
4.	Reporting Period (Please Check Appropriate Box)		ANADAMAN TO THE PROPERTY OF THE PARTY OF THE	Due Between		
a	JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015 JUNE 30TH REPORT -		Jan. 1 a	nd Feb. 1, 2016		
b	For Period of January 1, 2016 through May 31, 2016		June 1 and June 30, 2016			
С	PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016		Aug. 19 and Aug. 26, 2016			
d	POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016		Sept. 20 and Sept. 29, 2016			
е	PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	REPORT - Oct		28 and Nov. 4, 2016		
f	POST-GENERAL ELECTION REPÖRT - For Period of October 28, 2016 through November 28, 2016	771/2	Nov. 29	and Dec. 8, 2016		
			The state of the s			
5.	Summary	Colun Total This Rep		Column B Election Period Total to Date		
5а	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)			granding desired and desired and		
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	\$ 185·02				
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	250.00		455.∞		
	Subtotal (add lines b and c for column A and add lines a and c for column B)	435.02		455.00		
àa	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]					
	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	278.55		298.53		
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	160	47	166.47		

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

		PAGE 2
1. Committee Name Christine Gannon for County Supervi	SO8 2. ID#	10-112
3. Report covering period of Aug 19, 2016 - Sept 19, 2016	1000000	6-013
RECEIPTS	Column A This Period	Column B Campaign to Date
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	\$250.00	\$465.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		(MACCON)
(c) Political Committees (Total from Schedule B)	C	
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	250	455
(e) Refund of contributions (Total from Schedule F-2)	E. Special Control	
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	250	455
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		-
(b) All other loans (Total from Schedule C-1)		Simple
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		,
8. Total Receipts [add 4(f), 5(c), 6, and 7]	250	455
DISBURSEMENTS 9. Expenditures for operating expenses (Total from Schedule D)	278.55	299.53
9. Expenditures for operating expenses (Total from Schedule D)	278.55	298.53
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)	4	7
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	•	
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		40
15. Any other disbursement (Total from Schedule D-7)	Ja-ta-	
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	278.55	298.53
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	278.55	298.53
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and and complete.	to the best of my knowled	ge and belief it is true
Type or Print Name of Treasurer		
Cluste Gaman	9128/16	
Signature of Treasurer or Candidate or Designating Individual	Dale /	

revised 12/2013

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

	committee Name Christine Gannon for County Supervisor		10-013		
	3. Report covering period from AUQ 19, 2010 thru	Sept	19,2010		
4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
a	Name Christine Gaynon Street Address 4093 Fowest Ramn Rd City State Zip Royks AZ Bucks Occupation Employer Registered Hurse Flagstaff Medical Center	9/08/16	\$250.00	A THE STREET OF	
	Street Address City State Zip Occupation Employer				
C	Name Street Address City State Zip Occupation Employer				
đ	Name Street Address City State Zip Occupation Employer				
е	Street Address City State Zip Occupation Employer				
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]		250.60	355.00	

*If contributions of \$50 or less are listed with contributors name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

Schedule A Page _____ of ____

EXPENDITURES FOR OPERATING EXPENSES* SCHEDULE D 1. Committee Name Christine Gannon For Country Supervisor 16-03 Aua 3. Report covering period from Sept 19,2016 DATE AMOUNT **EXPENDITURES** EXPENDITURE OF THE NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE MADE EXPENDITURE Street Address 09/10/16 \$278,55 State Zip Description of Items or Services Purchased Campalgan Street Address City State Zip Description of Items or Services Purchased Name Street Address State Zip Description of Items or Services Purchased Name Street Address Zip State Description of Items or Services Purchased Name Street Address State Zip Description of Items or Services Purchased Name Street Address State Zip Description of Items or Services Purchased ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page Line 9, Column A] 278.55

Schedule D Page _____ of ___ revised 12/2013